

APPLICANTS

Pats
35 U

Verif

ADDRESS

TITLE

POSITION	ID.NO.	DATE
CLASSIFIER	P	9/13/99
EXAMINER	OC	9/13/99
TYPIST	INITCHER	9-14-98
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim.	Date
Final	
Original	
1	9/13/99
2	11/11/98
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SYMBOLS:

- Rejected
- Allowed
- (Through number) Cancelled
- Restricted
- Non-elected
- Interference
- Appeal
- Objection

Claim	Date
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